

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>8/4/04</u>		2 Serial/Patent # <u>10/797,426</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/>	Petition	/	8/7/04	\$ 130.00
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
		7 TOTAL AMOUNT OF REFUND		\$ 130.00
		8 TO BE REFUNDED BY:		
		Treasury Check		
		<input checked="" type="checkbox"/>	Credit Deposit A/C #:	
		9 13--1814		
10 REASON:				
	Overpayment			
	Duplicate Payment			
<input checked="" type="checkbox"/>	No Fee Due (Explanation):			
<div style="font-family: cursive; font-size: 1.2em;"> Drawings not necessary Should have been notice of omitted items </div>				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Patricia Faison-Ball</u>		TITLE: <u>Attorney</u>		
SIGNATURE: <u>Patricia Faison-Ball</u>		PHONE: <u>305 466 1187</u>		
OFFICE: <u>Petitions</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u>[Signature]</u>		DATE: <u>8/5/04</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**

0000015900
 08/05/2004
 Name/Number: 107/1187
 CR
 513040
 Repln
 Date: 8/5/04
 DAB: 1187
 FC: 94